DOCUMENT RESUME

ED 322 576 EA 022 027

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TITLE Reaching Out to Students at Risk of School Failure.
PUB DATE Feb 90
NOTE 19p.; Paper presented at the Annual Meeting of the American Association of School Administrators (San Francisco, CA, February 23-26, 1990).
PUB TYPE Guides - Non-Classroom Use (055) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS *Academic Failure; Dropout Prevention; Elementary Secondary Education; Helping Relationship; *High Risk Students; *High School Students; *Intervention; Potential Dropouts

ABSTRACT

Representing a school-based intervention strategy, the plan presented within this document was designed to help build a student's self-concept and to provide positive interactions between a student having difficulty succeeding at school and school personnel. While the plan is not intended to be a recipe for success with at risk students, it does serve as an example of how local school personnel with appropriate training can, with little or no significant cost, set in motion activities to help students perceive school as a place where they can belong and succeed. The program suggested in the document identifies school children at risk of school failure as a result of school and/or individual problems; corrects some common misconceptions about children at risk; offers a list of signs to aid in the diagnosis of at risk behaviors; and outlines at risk intervention procedures for school personnel. This program is a planned attempt to make the local school more caring and supportive of students who appear to experience difficulty in the school environment. (KM)

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REACHING OUT TO STUDENTS AT RISK OF SCHOOL FAILURE

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Paper presented at the Annual Meeting of the American Association of School Administrators, San Francisco, California, February 23-26, 1990.

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Reaching out to Students at Risk of School Failure

The plan represents a school based intervention to build student self concept and deliberately provide positive interaction between a student having difficulty succeeding at school and school personnel. It is not intended to be a recipe for succeeding with "at risk students." It does serve as one example of how local school personnel with appropriate training can, with little to no significant cost, set in motion activities to help students perceive school as a place where they can belong and have some success. It is a planned attempt to make the local school more caring and supportive of students who seem to experience difficulty in the school environment.

ORIENTATION

WHO : *Principal*

WHAT :

- *General explanation of students at risk in the school.*
- *Explanation of the creation of an at Risk Committee.*
- *Sell the idea of caring, sensitive commitment to the success of all students, and the necessity of intervention for students who are at risk.*
- *Sell the idea of total school involvement.*
- *Explain the duties of the committee members and the selection process.*
- *Initiate the selection process to some degree*

WHEN : *Beginning of the year staff development session. Preferably before students return.*

SCHOOL BASED PROGRAM TO IDENTIFY SCHOOL CHILDREN AT RISK

1. *Review of each student's records for common elements:*

    a. *History of performance as indicated by grades and other indicators.*

    b. *Repetition of any grades or courses.*

    c. *History of special services received*

    Example: *Special Education classes*
    Speech therapy
    Talented and gifted classes

2. *Students self assessment -*

    Administered by the professional school counselor or teacher with good rapport with the students.

3. *Provide appropriate intervention -*

    Example: *At Risk Committee (Care Committee)*
    Special classes/programs
    Conference

4. *Monitor students identified*

5. *Review and adjust procedures and intervention.*

6. *Establish At Risk Committee*

7. *Implementation*

8. *Evaluation*

THE MEANING OF AT RISK

The committee should survey teachers and use the input to refine a definition for the "at risk" child in that school. A general guideline may be given. Much has been written on the topic of at risk students. Generally it is accepted that they are students who are at risk of school failure as a result of various school and/or individual problems. The following are indicators generally accepted:

Consistent low grades
Previous grade level failure
Poor attendance
Poor health
Negative attitude toward school
Drugs and alcohol use/abuse
Delinquency
Frequent misbehavior
Pregnancy
Family problems
Frequent suspension

MISCONCEPTIONS ABOUT CHILDREN AT RISK

1. *Most students who are potentially unsuccessful in school are members of ethnic minority groups.*

2. *Most students who are potentially unsuccessful in school are economically poor.*

3. *Students will be at risk of school failure if they are members of a family with a single parent.*

4. *Nothing can be done at school to help at risk students.*

5. *Generally, parents don't care about their child's performance.*

LOCAL SCHOOL AT RISK COMMITTEE

Administrator - Principal or assistant

Teacher - One representing each grade level

Counselor

Nurse

Staff - One who will represent aides, custodians, food service workers, clerical workers.

Duties of the Committee

* *Review Referrals*
* *Notify appropriate personnel of initiation of formal support of students*
* *Monitor student progress*
* *Communicate with school personnel, parents/families, and students when appropriate.*
* *Planning*
* *Keep Records/Data*

THE PLAN

When a student is identified and referred, teachers teaching on the grade level in which the child is enrolled will begin to pay attention to and establish positive rapport with the student. The basic intent is to create situations so that the student will create a positive bond with school personnel The attempt will be made to make the student feel good about self and desire to be in the school setting.

Suggestions of possible behavior for employees with the student:

1. *Special effort to speak to the student by name.*

2. *Engage the student in brief conversations.*

3. *Find out something positive and praise the student sincerely.*

   Examples:

   a. *You are dressed nicely today.*
   b. *Good morning, _____. It is good to see you today.*
   c. *We missed you in class. I'm glad you are back.*

The student will be responding to positive interaction from every teacher in the grade and others (counselor, principal, nurse, etc.).

DIAGNOSIS: WHAT TO LOOK FOR

1. *Stays to self frequently; eats alone*
2. *Seems to have no friends*
3. *Low self confidence - I'm inadequate*
4. *Negative feelings*
5. *Frequently bored*
6. *Poor concentration*
7. *Frequent anger*
8. *Avoids academic work. Makes excuses*
9. *Signs of various health problems*
10. *Sad*
11. *Untidy, disheveled appearance*
12. *Poor reading/communication skills*
13. *Skipping class/school*
14. *General poor academic performance*
15. *Disobedient*
16. *Drug/alcohol abuse*
17. *Truant*
18. *Hyperactive*
19. *Cries often*
20. *Dependent upon teachers and peers*
21. *Inappropriate behavior: including fighting, lying, stealing*
22. *Family problems*
23. *Hostile attitude*
24. *Passive*
25. *Seeks attention*
26. *Inappropriate language; cursing*
27. *Poor choices*
28. *Clues of self destruction*
29. *History of school failure*
30. *Inattention of school work*
31. *Learning difficulties*
32. *Extremely high personal standards*
33. *Frequently ill: many visits to the nurse*
34. *Chronic tardiness/absenteeism*

INTERVENTION STRATEGIES

1. *Begin to establish a positive rapport with the student.*

    A. *Listen*
    B. *Be firm but supportive*
    C. *Consider the seriousness of the student's feelings and perceptions*
    D. *Be positive*
    E. *Give reassurances*
    F. *Display care and concern*

2. *Recruit family members*

3. *All school personnel play a role in reaching out to students. The school will be a support system.*

4. *Staff development in how to listen, especially to troubled children*

5. *Offer the following topics within the curriculum for all students:*

    A. *Problem solving skills*
    B. *Decision making*
    C. *Coping skills*
    D. *Recovery from failures and losses*

Supportive Teachers and Staff Members:

Ensure successful experience for students

Create an inviting, caring classroom environment

Encourage and provide for positive student to student interaction and student to teacher interaction in the classroom.

Make learning relevant

Use a variety of techniques

Set realistic goals for students

Be accepting
Sensitive
Patient
Enthusiastic
Flexibility

Consider the whole child

THE PROCEDURE

Identification
Referral
Contact and Rapport Building
Parental Contact
Monitor Student Progress
Evaluation

Prior to referrals - after orientation - All students should be given a student self assessment which will be filled out with the counselor or homeroom teacher.

All local school employees should participate in some form of orientation training. All local school employees can make referrals.

1. *An employee identifies a student who they think needs attention.*
2. *The employee fills out a referral form and turns it in to the appropriate grade level teacher representative. Non/classroom teacher employees will give referrals to the counselor or principal's designee.*
3. *A student profile form should accompany the referral when appropriate.*
4. *The committee meets to consider students and their progress.*
5. *Teachers who teach on the grade level in which the child is enrolled should be notified to begin communication with the child.*
6. *Parents of the student are invited to a conference and made aware of the child's involvement at an appropriate time as determined by the committee, teachers, and administrators of the school.*
7. *Evaluation of student response, perception, and progress through student/teacher/counselor conferences.*

STUDENT SELF ASSESSMENT

Please make a complete sentence of the following groups of words. Use your own words. The sentences will help provide a profile of you to help make you successful at _____ School.

I feel happy when _____.

I feel ashamed when _____.

I feel afraid when _____.

I worry when _____.

I feel that school _____.

The thing I like best is _____.

The thing I like least is _____.

The parent I spend most time with is _____.

My brother and sister are _____.

My friends _____.

Most people think that I _____.

I feel sad when _____.

My teachers think that I _____.

CARE REFERRAL

Recommending Teacher _____

Date _____

Student _____ *Grade* _____

Homeroom _____ *Homeroom Teacher* _____

Behavior/Academic Problems Observed: _____

_____

_____

_____

_____

STUDENT PROFILE

Student _____ *Grade* _____

Semester _____

Teacher _____

Please check the number reflecting the number of times the student has exhibited the behaviors listed below.

Class Behavior/Performance	***Frequency***		
	Once	***Twice***	***Three or more***
Grades falling	_____	_____	_____
Little/No effort	_____	_____	_____
Lack of class preparation	_____	_____	_____
Incomplete class work	_____	_____	_____
Dissatisfied with school	_____	_____	_____
Lack of motivation	_____	_____	_____
Inappropriate behavior	_____	_____	_____
Example _____			
Health problems	_____	_____	_____
Family problems	_____	_____	_____
Poor attendance	_____	_____	_____
Appearance	_____	_____	_____
<u>Interventions</u>			
Parent Conference	_____	_____	_____
Sent to Counselor	_____	_____	_____
Sent to nurse	_____	_____	_____
Sent to principal	_____	_____	_____
Other _____			

CHECKLIST FOR PARENTS

Is your teenager at risk? Have you noticed:

Poor scholastic performance? _____

Discipline problems at home or school? _____

Violent, aggressive behavior? _____

Withdrawal from family and friends? _____

Change of friends/peer groups? _____

Change in appearance? _____

Changes in eating or sleeping habits? _____

Severe mood swings? _____

Trouble with the law? _____

Sexual promiscuity? _____

Alcohol or drug use? _____

Talk of suicide? _____

If you answered yes to any of the above questions, you may want to talk to your child's school principal or school counselor. See if they can help or recommend another professional.

Source: Adapted from Charter Hospital, Fortworth, Texas.

Suggested Reading

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